1. 20. 34, 43,46

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10711707

_												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				R THAN
TOTAL CLAIMS			1	18				RATE	FEE		RATE.	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE			BASIC FEI	
TOTAL CHARGEABLE CLAIMS			ABr	Ak minus 20= *		28		XS 9=	1	7	V510	
INDEPENDENT CLAIMS			5 minus 3 = "			-	1		+	OR	 	150x
М	JLTIPLE DEPE	ENDENT CLAIM I	/				}	X43=	 	OR	X86=	172.
* If the difference is column 1 is less than a second and in the s								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1456
CLAIMS AS AMENDED - PART II						(0)		CMALL	ENTITY		OTHER	
(Column 1)				(Column 2) (Colum				SMALL	ENIIIT	OR	SMALL	ENIIIY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus	***		=		X43=		OR	X86=	·
	FIRST PRES	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
							L				1230-	
								TOTAL	1	OR	TOTAL	
							AD	DIT. FEE	Щ		ADDIT. FEE	L
		(Column 1)		(Colum	n 2)	(Column 3)						
		CLAIMS		HIGHE		1	_			, ,		
m		REMAINING		NUMB	ER	PRESENT	ı		ADDI-	1 i	· 1	ADDI-
=		AFTER	ļ	PREVIOL	JSLY	EXTRA		RATE	TIONAL	}	RATE	TIONAL
┇		AMENDMENT		PAID FO	OR		· L		FEE	1 1		FEE
AMENDMENT	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
AM	Independent	*	Minus	***		=		X43= .		OR	X86=	
	PIRST PRESE	NTATION OF ML	LIPLE DEF	PENDENT	LAIM		-			l " '		
				,			Ŀ	145=		OR	+290=	
									•	OR .	TOTAL	
		X				•	. ADL	DIT. FEE L		А	DDIT. FEE	
		(Column 1)		(Column	(2)	(Column 3)		•				,
۱ د	`	CLAIMS		HIGHES					ADD:	г		155
		REMAINING		NUMBE		PRESENT	1		ADDI-			ADDI-
:		AFTER		PREVIOU		EXTRA	F	ATE	TIONAL	1	RATE	TIONAL
┇┝	·	AMENDMENT		PAID FO	H		<u>L</u>		FEE	. L		FEE
-	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
<u> </u>	ndependent	l	Minus	***		=	×	43=			X86=	
1	HST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR		
							1 41	45=		OR	+290=	1
If t	he entry in colum	1	TOTAL		Un L	.200-						
• If t	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR .	TOTAL	
11	he "Highest Nun	nber Previously Pai	d For IN THIS	SPACE is le	ss than	3 enter "3 °		T. FEE		AL	DIT. FEEL	
Th	e "Highest Numt	ber Previously Paid	For* (Total or	Independent)	is the h	ighest number fo	ound ir	the appr	opriate box	in colun	no 1.	
									, =:-			